1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Adair Co	unty		State
	Street Address 1204 Gr	eensburg St		□ Federal
	City, State Zip Columbi	a, KY 42728		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		7-6-	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$177,852.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	, · ·	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Norse /Title)	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Allen Co	•		State
	Street Address 570 Oliv	er St.		
	City, State Zip Scottsvil	le, KY 42164		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$139,791.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13	·		Dudget is reserve	nired for this program. The final federal cash request must be
13	submitted by December 8, 20		Budget is requ	ired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	= -	ge Independent		State
	Street Address 11400 R	idge Rd		
	City, State Zip Anchora	ge, KY 40223		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UN
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$7,140.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dudos is no sud	ined for this program. The final foderal cosh required to the
13	•		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	on County		State
	Street Address 1160 By	pass North		
	City, State Zip Lawrenc	eburg, KY 40342		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ _^ \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ive Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$106,631.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF ED	outcomes.
		encumbered by September 30, 2017. The quarterly	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1 (Sept. Sept. 1) (Sept. 1
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		Dudmat in me	ined for this was mare. The final fordered such as we want to see he
13	•	, , , , , , , , , , , , , , , , , , ,	Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Ashland	Independent		State	
	Street Address PO Box 3	3000		∑ Federal	
	City, State Zip Ashland	, KY 41101		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- DV (Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	- 61//	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		7	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15	A \		
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	-	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requireme	nts		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & PI	REPAR	D FOR	
5	REVISED Award Amount:	$c \mid l \mid c \mid c$	11	Evaluations: Districts must annually evaluate	
	\$197,650.00	3 0 6 6		and principle quality funds to ensure they are	
6	Period of Award:		-	dentified needs and are effective in producir	ng the desired
	July 1, 2015 – September 30,		IT OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Meml	s September 30, 2017 must reflect encumbrances.)		<u> </u>	
13		ons: The submission of the Teacher Quality Program Bu	idaat is real	ed for this program. The final federal cash re	aquest must he
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	iuget is requ	a for this program. The final federal cash re	quest must be
	Janimeted by December 0, 20	·-··			
14	Authorized By (Name/Title):	Robin Hebert, Director		ate: March 2, 2016	
		Division of Next Generation Professionals			
			-		

1	Name and Address of Recipie	ent:	7	Fund Type:
		Independent		State
	Street Address 307 Brad	cken St		□ Federal
	City, State Zip Augusta	, KY 41002		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	"	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	. 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$14,105.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date: Warth 2, 2010
		DIVISION OF NEXT DEHELATION PROJESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Ballard County			State
	Street Address 3465 Page	ducah Rd		□ Federal
	City, State Zip Barlow,	KY 42024		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	1 11 11 -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	4	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·		
		PROFICIENT & PR	FPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$61,204.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	r of Fr	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		OCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Buc	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
	A .1 . 15 /a. /	B.I. H.I. A.B.		D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:			Fund Type:
	Agency Name Barbourville Independent			State
	Street Address PO Box 52	20		
	City, State Zip Barbourv	ille, KY 40906		Other:
			8	Method of Payment:
2	KDE Contact Information:	21/61	100	Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	- 4	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
	,, ,		9	Reimbursement Frequency:
3	Description/Fund Source of Av	ward and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
_	Curant Authority (Course), NCI	D. Title II. Down A. EDCAD 24 CED Downs 7C 77, 70, 01, 0 CE		
4		.B, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85 e Requirements, Cost Principles, and Audit Requirements		
	for Federal Awards in 2 CFR Pa			
	101 redetal Awards III 2 CFK Fa	PROFICIENT & PRE	DAD	ED EOP
5	REVISED Award Amount:	T NOFICIENT OR T NEI	11	Evaluations: Districts must annually evaluate the use of teacher
	\$47,350.00	SUCCI		and principle quality funds to ensure they are used to address
6	Period of Award:		Danie.	identified needs and are effective in producing the desired
	July 1, 2015 – September 30, 2	017 KENTUCKY DEPARTMENT O	F Er	outcomes.
		ocumbered by September 30, 2017. The quarterly	OF EL	DUCATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Membe			
13	Special Instructions/Condition	s: The submission of the Teacher Quality Program Budget	is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20			
	• •			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	,	wn Independent		State
	Street Address 308 N Fi	fth St		Federal
	City, State Zip Bardstov	wn, KY 40004		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	-	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	5-	
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	. & 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	ments	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$84,338.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	a stronger Succession
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D 1 1:	- 16 di
13	_ =		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
	I .			

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Barren C	,		State
	Street Address 202 W V	Vashington St		□ Federal
	City, State Zip Glasgow	, KY 42141		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V C	II II -	Federal Cash Request
	Program Consultant	Title II Consultants	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		-	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85	5	
-	, , , , , , , , , , , , , , , , , , , ,	ive Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PRI	EPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$173,784.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	, ,	et is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy /News/Title)	Pohin Hohart Director		Pate: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Ty	/pe:
	Agency Name Bath County				State
	Street Address 405 W N	lain St		\boxtimes	Federal
	City, State Zip Owingsv	ille, KY 40360			Other:
			8		d of Payment:
2	KDE Contact Information:	- OV /			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		14	Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	-		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	_		
			9		rrsement Frequency:
3	Description/Fund Source of A				Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality			Other
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10		al Reporting Method:
	MOA Number	N/A	/		Electronic Submission
	Pass-through Number	3230002-15			
					Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	§ 85		
		ve Requirements, Cost Principles, and Audit Requireme	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	EDF	OR
5	REVISED Award Amount:	$c \cup c \subset c$	11	The second secon	ions: Districts must annually evaluate the use of teacher
	\$123,759.00	3 0 6 6		Application of the second	nciple quality funds to ensure they are used to address
6	Period of Award:		_		ed needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcom	ies. N
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)			
13	•	ons: The submission of the Teacher Quality Program B	udgot is rose	irod for th	nic program. The final federal each request must be
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	uaget is requ	iirea ior ti	ns program. The final federal cash request must be
	Submitted by Determiner 6, 20	y±/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: N	March 2, 2016
		Division of Next Generation Professionals			

1			7	Fund Ty	Fund Type:	
	Agency Name Beechwood Independent				State	
	Street Address 50 Beecl	hwood Rd			Federal	
	City, State Zip Fort Mit	chell, KY 41017			Other:	
			8	Method	of Payment:	
2	KDE Contact Information:			$ \boxtimes $	Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.			Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.			Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601				
		- V	9	Reimbu	rsement Frequency:	
3	Description/Fund Source of A	Award and Fiscal Year:			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality			Other	
	CFDA#	84.367A				
	PR/AWARD NUMBER (FAIN)	S367A150016	7			
	MUNIS Project Number	401B	10	Financia	al Reporting Method:	
	MOA Number	N/A			Electronic Submission	
	Pass-through Number	3230002-15	1 .			
					Other	
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81				
		ve Requirements, Cost Principles, and Audit Requirem	nents			
	for Federal Awards in 2 CFR P	art 200.				
		PROFICIENT & P	REPAR	los find?	OR	
5	REVISED Award Amount:	C II C C	11	100	ions: Districts must annually evaluate the use of teacher	
	\$18,665.00	3 0 6 6			nciple quality funds to ensure they are used to address	
6	Period of Award:				ed needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcom	es.	
		encumbered by September 30, 2017. The quarterly				
12		s September 30, 2017 must reflect encumbrances.)				
12	Consortia/Partnership Memi		Doodest'	the decision of	Commence The Confidence of the	
13	_ =	ons: The submission of the Teacher Quality Program 6	Budget is requ	iired for th	is program. The final federal cash request must be	
	submitted by December 8, 20	UI/.				
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: N	March 2, 2016	
		Division of Next Generation Professionals			,	
	L					

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Bell County			State	
	Street Address PO Box 3	340			
	City, State Zip Pineville	, KY 40977		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- DV C	WW -	Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	-	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		5-12	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15	. \		
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85			
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirement	5		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & PRI	EPAR	ED FOR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$267,025.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		80 SEC 10 10 10 10 10 10 10 10 10 10 10 10 10	
		September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13	'='		et is requ	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	017.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	Additionized by (Name) fille).	Division of Next Generation Professionals		Dutc. March 2, 2010	
L		DIVISION OF NEXT GENERALION FIGURESSIONALS			

1	·		7	Fund Type:
		Independent		State
	Street Address 219 Cen	ter St		
	City, State Zip Bellevue	e, KY 41073		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ A \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$37,184.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dualmat in me	ined for this program. The final foderal cosh required world by
13	•	•	Budget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	·		7	Fund Type:
	Agency Name Berea Independent			State
	Street Address 3 Pirate	Pkwy		
	City, State Zip Berea, K	Y 40403		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	- 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$43,487.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		· •	ıdget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized Du (Nome / Title)	Dahia Hahart Director		Detail Mariel 2, 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Boone County			State	
	Street Address 8330 US	42			
	City, State Zip Florence	, KY 41042		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	-01/6	MIN -	Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		5-12	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiremen	ts		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & PR	EPAR	ED FOR	
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$386,190.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		69-5-287 - 50-579-3-59-55	
		September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13	'='		get is requ	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	017.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
17	Additionized by (Name) fille).	Division of Next Generation Professionals		butc. (Waren 2, 2010)	
L		Division of Next Generation From Silvings			

1	·		7	Fund Type:
	Agency Name Bourbon County			State
	Street Address 3343 Lex	kington Rd		
	City, State Zip Paris, KY	40361		Other:
			8	Method of Payment:
2	KDE Contact Information:	a V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$98,645.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	, ,	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorition Decision - /Title	Dahin Haharit Director		Datas March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Bowling	Green Independent		State	
	Street Address 1211 Ce	nter St			
	City, State Zip Bowling	Green, KY 42101		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- DV (Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	- 17	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		7	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85		
		ve Requirements, Cost Principles, and Audit Requireme	nts		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	$c \mid l \mid c \mid c$	11	Evaluations: Districts must annually evaluate the use of te	
	\$201,046.00	3 0 6 6		and principle quality funds to ensure they are used to addr	
6	Period of Award:		-	identified needs and are effective in producing the desired	l
	July 1, 2015 – September 30,		IT OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Meml	s September 30, 2017 must reflect encumbrances.)			
13			idaat is requi	ired for this program. The final federal cash request must b	
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	iuget is requ	red for this program. The inial federal cash request must b	E
	Janimeted by December 0, 20	·-··			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
		Division of Next Generation Professionals			
					-

1	·		7	Fund Type:
	Agency Name Boyd Co	•		State
	Street Address 1104 Bo	b McCullough Dr		
	City, State Zip Ashland	, KY 41102		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UN
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$171,500.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	,	
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D 1 1.	
13	_ =		Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
	I .			

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Boyle County			<u> </u>
	Street Address 352 N Da	anville By-Pass		Federal
	City, State Zip Danville,	KY 40422		Other:
			8	Method of Payment:
2	KDE Contact Information:	101/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	U. 111	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$99,334.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		- 60 Cod8 (- 50 CO 60 CO CO)
42		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		, , , , , , , , , , , , , , , , , , ,	Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	radionized by (iddine, inte).	Division of Next Generation Professionals		- maion 2, 2010
		5.VISION OF WORL GENERALION FROM COSTONIAIS		

1	·		7	Fund Type:
	Agency Name Bracken County			State
	Street Address 348 W N	Лiami St		□ Federal
	City, State Zip Brooksvi	ille, KY 41004		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C		Federal Cash Request
	Program Consultant	Title II Consultants	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.	44///	Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_ ~	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	4	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	, , , , , ,	ive Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	FPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$59,545.00	5 U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	r of Fr	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		JOCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	bers:		
13	Special Instructions/Condition	ons: The submission of the Teacher Quality Program Bud	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:
	,	t County		State
	Street Address PO Box 7	750		
	City, State Zip Jackson,	KY 41339		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15	/ . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I ON
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$232,945.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Sec. (Add 1) 2 (2000) (Add 2000)
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		Dudmat !	ined for this program. The final factors to the control of
13	_ =	· •	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	, (Division of Next Generation Professionals		- ,
	I .			

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Breckinridge County			State	
	Street Address 86 Airpo	ort Road		Fede	ral
	City, State Zip Hardinsl	ourg, KY 40143		Othe	er:
			8	Method of P	•
2	KDE Contact Information:	- DV			eral Cash Request
	Program Consultant	Title II Consultants			nditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.			matic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306			p Sum
	Street Address	16 th Floor, 500 Mero St.	7 -	Rece	ipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601			
			9		ent Frequency:
3	Description/Fund Source of A			Mon	•
	Description	FY2016 Title II, Part A Improving Teacher Quality			rterly
	Fund Source	Title II, Part A Improving Teacher Quality		Othe	er
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10		orting Method:
	MOA Number	N/A	/	Elect	ronic Submission
	Pass-through Number	3230002-15			
				Othe	er
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	§ 85		
		ve Requirements, Cost Principles, and Audit Requirement	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	$c \cup c \subset c$	11		Districts must annually evaluate the use of teacher
	\$150,294.00	3 0 6 6		40000	quality funds to ensure they are used to address
6	Period of Award:		-		eds and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Meml	s September 30, 2017 must reflect encumbrances.)			
13		ons: The submission of the Teacher Quality Program B	udget is requ	ad for this pro	ogram. The final federal cash request must be
13	submitted by December 8, 20		uuget is requ	eu ioi tilis pit	gram. The imal rederal cash request must be
	Juminicia by December 0, 20	v±/,			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March	2, 2016
		Division of Next Generation Professionals			

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Bullitt Co	•		State
	Street Address 1040 Hw	·		
	City, State Zip Shepher	dsville, KY 40165		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UN
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$389,350.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		Dudos is no sud	ined for this program. The final foderal cosh required to the
13	•	· •	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipient:		Fund Type:
	Agency Name Burgin Independent		State
	Street Address PO Box B		
	City, State Zip Burgin, KY 40310		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant <u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address 19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address 16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, KY 40601	the same	
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source Title II, Part A Improving Teacher Quality		Other
	CFDA# 84.367A		
	PR/AWARD NUMBER (FAIN) S367A150016		
	MUNIS Project Number 401B	10	Financial Reporting Method:
	MOA Number N/A		Electronic Submission
	Pass-through Number 3230002-15		
			Other
4	Grant Authority (Source): NCLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	85	
	and the Uniform Administrative Requirements, Cost Principles, and Audit Requiremen	nts	
	for Federal Awards in 2 CFR Part 200.		
	PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	11	Evaluations: Districts must annually evaluate the use of teacher
	\$12,385.00		and principle quality funds to ensure they are used to address
6	Period of Award:		identified needs and are effective in producing the desired
	July 1, 2015 – September 30, 2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
	(All funds must be spent or encumbered by September 30, 2017. The quarterly	50.0	94 (Sec. 1976) (1997) (1997)
	report for the period ending September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: The submission of the Teacher Quality Program Buc	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 2017.		
14	Authorized By (Name/Title): Robin Hebert, Director		Date: March 2, 2016
	Division of Next Generation Professionals		
<u> </u>	2 Mission of Next deficiation (Tolessionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Butler Co	•		State
	Street Address PO Box 3	339		
	City, State Zip Morgant	town, KY 42261		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$124,130.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		1 (Statement - 1907) (Mary 1907)
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi)d==+ i= ==	ined for this group was The final fodougles as he was not been be-
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		·

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Caldwell	•		State
	Street Address PO Box 2	229		
	City, State Zip Princeto	n, KY 42445		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		7	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$115,188.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Quidant is rose:	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	· ·	Budget is requi	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		·

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Calloway			State
	Street Address PO Box 8	300		
	City, State Zip Murray,	KY 42071		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	WW.	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$140,491.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	r of Er	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		, · · ·	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date. Waltin 2, 2010
		DIVISION OF NEXT DEHELATION FLOIGSSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
		ll County		State
	Street Address 101 Orch	hard Ln		
	City, State Zip Alexand	ria, KY 41001		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$110,222.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		(Sp. 100 A 10
40		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13	•	· ·	Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	Additionized by (Maine, Inte).	Division of Next Generation Professionals		5460. IMMICH 2, 2010
		Division of Next Generation (1016331011813		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Campbe	llsville Independent		State
	Street Address 136 S Co	lumbia		Federal Federal
	City, State Zip Campbe	llsville, KY 42718		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.)	
		PROFICIENT & P	'REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$98,730.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,			outcomes.
		encumbered by September 30, 2017. The quarterly		
12		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			in disable was many The Breakford 1 1 1 1 1 1 1 1 1
13	-	· · · · · · · · · · · · · · · · · · ·	suaget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
<u> </u>				

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Carlisle (County		State
	Street Address 4557 Sta	te Rt 1377		
	City, State Zip Bardwel	l, KY 42023		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		2-18	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiremen	ts	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PR	<u>EPAR</u>	ED FOR
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$42,688.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		r of E	outcomes.
		encumbered by September 30, 2017. The quarterly	3 48.4	- 90 cales (0.0 cale) (0.0 cale)
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	'='		lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
17	Additionized by (Name) fille).	Division of Next Generation Professionals		54.6. IVIGION 2, 2010
L		DIVISION OF IVEAU GENERALION FIOLESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Carroll C	ounty		State
	Street Address 813 Haw			□ Federal
	City, State Zip Carrollto	on, KY 41008		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	" II II -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
ļ -	, , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$97,496.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF EI	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13		, · ·	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
		B.I. H.I. A.B.		D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Carter County		State
	Street Address 228 S Carol Malone Blvd		
	City, State Zip Grayson, KY 41143		Other:
		8	Method of Payment:
2	KDE Contact Information:	all Cir.	Federal Cash Request
	Program Consultant <u>Title II Consultants</u>	KY UHIZ	Expenditure Reimbursement
	Street Address 19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact Stephanie Mack, 502-564-1979 Ext. 4	306	Lump Sum
	Street Address 16 th Floor, 500 Mero St.	- 1-	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, KY 40601	-505-	
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description FY2016 Title II, Part A Improving Teac	her Quality	Quarterly
	Fund Source Title II, Part A Improving Teacher Qua	lity	Other
	CFDA# 84.367A		
	PR/AWARD NUMBER (FAIN) S367A150016		
	MUNIS Project Number 401B	10	Financial Reporting Method:
	MOA Number N/A		Electronic Submission
	Pass-through Number 3230002-15		
			Other
4	Grant Authority (Source): NCLB, Title II, Part A, EDGAR 34 CFR Parts	76, 77, 79, 81 & 85	
	and the Uniform Administrative Requirements, Cost Principles, and A	Audit Requirements	
	for Federal Awards in 2 CFR Part 200.	0.0	
	PROFICIEN	IT & PREPAR	ED FOR
5	REVISED Award Amount:		Evaluations: Districts must annually evaluate the use of teacher
	\$326,699.00		and principle quality funds to ensure they are used to address
6	Period of Award:		identified needs and are effective in producing the desired
	July 1, 2015 – September 30, 2017	EPARTMENT OF E	outcomes.
	(All funds must be spent or encumbered by September 30, 2017.		Bartouller (100 or 100 pp. 100)
	report for the period ending September 30, 2017 must reflect ence	umbrances.)	
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: The submission of the Teacher Qua	ality Program Budget is requi	red for this program. The final federal cash request must be
	submitted by December 8, 2017.		
14	Authorized By (Name/Title): Robin Hebert, Director		Date: March 2, 2016
	Division of Next Generation Professio		
<u> </u>	2. VISION OF NEXT GENERALISH FIOLESSIO		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Casey Co	punty		State
	Street Address 1922 N U	JS 127		□ Federal
	City, State Zip Liberty,	KY 42539		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V C	WW -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	M//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:		11	Evaluations: Districts must annually evaluate the use of teacher
	\$166,372.00	2 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		· ·	get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date: Wartin 2, 2010
	<u> </u>	DIVISION OF NEXT DEHELATION PLOIESSIONALS		

1	Name and Address of Recipie		7	Fund Type:
		Independent		State
	Street Address 1102 N.	Dixie Hwy		□ Federal
	City, State Zip Cave Cit	y, KY 42127		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	1	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$56,721.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	60 000 000 000 000 000 000 000 000 000
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi			
13	_ =		Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	U17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
- '	, indicate of the control of the con	Division of Next Generation Professionals		2000
	L	2 Of ITEM GENERALION FROM STORING		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Christiar	n County		State
	Street Address PO Box 6	509		
	City, State Zip Hopkins	ville, KY 42241		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$558,933.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		<u></u>
13	•		Dudgot is reserv	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	· •	Budget is requ	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	y1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•
	I			-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Clark Co	unty		State
	Street Address 1600 W	Lexington Ave		
	City, State Zip Winches	ter, KY 40391		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$252,227.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		OCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Bu	ıdget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Clay Cou	inty		State
	Street Address 128 Rich	mond Rd		□ Federal
	City, State Zip Manche	ster, KY 40962		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	"	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	may .	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	T- B	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	85	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$400,317.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		<i>,</i> — —	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy (Nome /Title)	Pohin Hohart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Clinton (•		State
	Street Address 2353 N I	Hwy 127		□ Federal
	City, State Zip Albany,	KY 42602		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	5	
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$127,552.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	- Sept. Code 1 - Sept. Code (Code Code Code Code Code Code Code Code
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		5 L .: .	
13	_ =	•	Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		····
	I .			

1	Name and Address of Recipie	ent:	7	Fund Type:
		ort Independent		State
	Street Address PO Box 3	37		
	City, State Zip Cloverpo	ort, KY 40111		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	§ 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirements	ents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UII
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$16,429.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		u daskia ne	ined for this program. The final foderal such removed which
13	•	, , , , , , , , , , , , , , , , , , ,	uaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	ndependent		State
	Street Address 108 Roy	Kidd Ave		□ Federal
	City, State Zip Corbin, I	KY 40701		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ A \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$118,873.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13			Pudgot is most i	ired for this program. The final federal cash request must be
13	submitted by December 8, 20	, , , , , , , , , , , , , , , , , , ,	Budget is requi	ired for this program. The final federal cash request must be
	Submitted by December 8, 20	y1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipient:		7	Fund Type:
		on Independent		State
	Street Address 25 E Sev	enth St		□ Federal
	City, State Zip Covingto	on, KY 41011		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	" II II -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$413,882.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		, · ·	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date: Warth 2, 2010
	<u> </u>	DIVISION OF NEXT GENERATION PROTESSIONALS		

1	Name and Address of Recipient:		7	Fund Type:
	<i>,</i>	en County		State
	Street Address 601 W E	Im St		□ Federal
	City, State Zip Marion,	KY 42064		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	1111	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	RIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	85	
	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$88,759.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		, · · ·	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date: Watch 2, 2010
		DIVISION OF NEXT DEHELATION PROJESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	= -	land County		State
	Street Address PO Box 4	420		
	City, State Zip Burkesvi	ille, KY 42717		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		72	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$82,636.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		SW 0480 3 9000 SA 7000
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==# != #= !	in all fau this was guess. The final fadoual angle was asset would be
13	•	· ·	Buaget is requi	red for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•

1	Name and Address of Recipie		7	Fund Type:
		Independent		State
		artin Luther King Blvd		
	City, State Zip Danville,	, KY 40422		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$97,670.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		SW 048 V 3 900 V 5 40 V 7 V 5 J
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi)dma# to ust	ined for this was grown. The final fodoral cock we want to the
13	•		Buaget is requi	red for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Daviess	County		State
	Street Address PO Box 2	21510		
	City, State Zip Owensb	oro, KY 42304		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$360,044.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	,	Service State (1997) Control of the
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D 1 1 1	
13	_ =	, , , , , , , , , , , , , , , , , , ,	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
	I .			

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Dawson	Springs Independent		State	
	Street Address 118 E Ar	cadia Ave		Federal	
	City, State Zip Dawson	Springs, KY 42408		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- DV (Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	- 17	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		7	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requireme	nts		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & PI	REPAR	PED FOR	
5	REVISED Award Amount:	$c \cup c \subset c$	11	Evaluations: Districts must annually evaluate the use of teacher	•
	\$26,108.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:		-	identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		IT OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)			
13	•		idaet is requi	uired for this program. The final federal cash request must be	
13	submitted by December 8, 20		iuget is requ	alled for this program. The final federal cash request must be	
	Jubilities by Decelliner 0, 20	v±/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	•	Division of Next Generation Professionals			

1	Name and Address of Recipie	ent:	7	Fund Type:
		ndependent		State
	Street Address 200 Clay	St		
	City, State Zip Dayton,	KY 41074		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		72	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$74,555.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		See Greek 1 S 10 COVER AND COVER
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==# != #= !	and for this program. The final foderal cosh personal costs
13	•	· ·	Buaget is requi	red for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•

1	Name and Address of Recipient:		Fund Type:	
	Agency Name East Bernstadt Independent		State	
	Street Address PO Box 128			
	City, State Zip East Bernstadt, KY 40729		Other:	
		8	Method of Payment:	
2	KDE Contact Information:	11 11 -	Federal Cash Request	
	Program Consultant <u>Title II Consultants</u>	HII	Expenditure Reimbursement	
	Street Address 19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address 16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip Frankfort, KY 40601			
		9	Reimbursement Frequency:	
3	Description/Fund Source of Award and Fiscal Year:	-	Monthly	
	Description FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source Title II, Part A Improving Teacher Quality		Other	
	CFDA# 84.367A			
	PR/AWARD NUMBER (FAIN) S367A150016			
	MUNIS Project Number 401B	10	Financial Reporting Method:	
	MOA Number N/A		Electronic Submission	
	Pass-through Number 3230002-15			
			Other	
4	Grant Authority (Source): NCLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5		
	and the Uniform Administrative Requirements, Cost Principles, and Audit Requirement	ts		
	for Federal Awards in 2 CFR Part 200.			
	PROFICIENT & PR	<i>EPAR</i>	ED FOR	
5	REVISED Award Amount:	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$26,079.00		and principle quality funds to ensure they are used to address	
6	Period of Award:		identified needs and are effective in producing the desired	
	July 1, 2015 – September 30, 2017 KENTUCKY DEPARTMENT	OF E	outcomes.	
	(All funds must be spent or encumbered by September 30, 2017. The quarterly		(Sec. 1994 - Sec. 1994 1994	
	report for the period ending September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: The submission of the Teacher Quality Program Bud	get is requ	fired for this program. The final federal cash request must be	
	submitted by December 8, 2017.			
14	Authorized By (Name/Title): Robin Hebert, Director		Date: March 2, 2016	
	Division of Next Generation Professionals			
<u> </u>				

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Edmonson County			State
	Street Address PO Box 1	129		
	City, State Zip Brownsv	ille, KY 42210		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HI	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.	44//	Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	76	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-		ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	RED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$114,082.00	2 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13	•	, ,	ıdget is reqi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.0	A with a size of Dec (Nigros a /mix) - V	Dahia Hahart Dinastar		Date: March 2 2016
14	Authorized By (Name/Title):	•		Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Elizabethtown Independent			State
	Street Address 219 Helr	m St		Federal
	City, State Zip Elizabetl	ntown, KY 42701		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$86,966.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,			outcomes.
		encumbered by September 30, 2017. The quarterly		1 Sec. 1987 - 3 Sec. 1988 - 20 Sec.
42		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			- 16 16 16 1
13	•	· ·	Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	riamonized by (Numer inter-	Division of Next Generation Professionals		
L		2.11.5.5.11 of Next Generation From Costonials		

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Elliott County			State	
	Street Address PO Box 7	767			
	City, State Zip Sandy H	ook, KY 41171		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	10/1		Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016	7		
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81			
		ve Requirements, Cost Principles, and Audit Requirem	nents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED I UI	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$95,460.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		1 (State 1997) 1 (Sta	
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memb		Dudos is a	ived for this presence. The final foderal each required accepts	
13	•		Budget is requ	uired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•	
				-	

1	Name and Address of Recipient:		7	Fund Type:	
		ce Independent		State	
	Street Address 291 W B	roadway		□ Federal	
	City, State Zip Eminend	ce, KY 40019		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- OV		Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601	5-		
		- V	9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81			
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	ments		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$30,074.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly	7	Sec 5000 1 5 500000 SE-200000	
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memi		5 L .: .		
13	_ =	•	Budget is requi	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
		Division of Next Generation Professionals			
	I .				

1	Name and Address of Recipient:		7	Fund Type:
		-Elsmere Independent		State
	Street Address 500 Grav	ves Ave		
	City, State Zip Erlanger	, KY 41018		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	5	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UN
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$79,900.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	Sept. (1988) 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		B 1	
13	_ =	· · · · · · · · · · · · · · · · · · ·	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
	I .			

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Estill County			State	
	Street Address PO Box 9	930			
	City, State Zip Irvine, K	Y 40336		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- OV C	WW.	Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601	Cong.		
			9	Reimbursement Frequency:	
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35		
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen			
	for Federal Awards in 2 CFR P				
		PROFICIENT & PR	EPAR	ED FOR	
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$182,691.00	5 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	r of Er	outcomes.	
		encumbered by September 30, 2017. The quarterly		CATION	
		September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memb				
13		, · · ·	lget is requ	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	017.			
14	Authorized Du (Nonce /Tiste)	Dahia Haharit Director		Data. March 2 2016	
14	Authorized By (Name/Title):			Date: March 2, 2016	
		Division of Next Generation Professionals			

1	Name and Address of Recipient:		7	Fund Type:	
		Independent		State	
	Street Address 2201 Ma	in Street		□ Federal	
	City, State Zip Ashland	KY 41102		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- OV (Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	. H //	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A	Award and Fiscal Year:	1-1	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85		
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen			
	for Federal Awards in 2 CFR P				
		PROFICIENT & PR	REPAR	ED FOR	
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$23,616.00	2000		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF FI	outcomes.	
		encumbered by September 30, 2017. The quarterly			
		September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13	_ =	, · ·	dget is requ	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	017.			
14	Authorized Du (Nonce /Title)	Dahia Hahart Dinastar		Data: March 2 2016	
14	Authorized By (Name/Title):			Date: March 2, 2016	
		Division of Next Generation Professionals			

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Fayette	County		State	
	Street Address PO Box 5	55490			
	City, State Zip Lexingto	n, KY 40555		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- OV C	III .	Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A	Award and Fiscal Year:	4	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35		
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requiremen			
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·			
		PROFICIENT & PR	FPAR	ED FOR	
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$1,429,048.00	5 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		CATION	
		September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13		, · ·	lget is requ	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	017.			
1.4	Authorized Du (Nove - /Tt)	Dahia Haharit Director		Date: March 2 2016	
14	Authorized By (Name/Title):			Date: March 2, 2016	
		Division of Next Generation Professionals			

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Fleming	County		State	
	Street Address 211 W V	Vater St		□ Federal	
	City, State Zip Flemings	sburg, KY 41041		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- OV		Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601	1-		
			9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	ments		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$141,228.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly	7		
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memi		Dudget is no	ined for this program. The final foderal each required to the	
13	_ =		Buaget is requi	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	, (Division of Next Generation Professionals		,	
	I .				

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Floyd Co	punty		State	
	Street Address 106 N Fr	ront Ave		□ Federal	
	City, State Zip Prestons	sburg, KY 41653		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	10V		Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
		- 7	9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15	/ A N		
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85		
	and the Uniform Administrati	ive Requirements, Cost Principles, and Audit Requirem	nents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$602,326.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		500 (mile 1	
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memi		Dualmat in me	ined for this are grown. The final fodoral and warment would be	
13	•		Budget is requi	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		<i>,</i>	
				-	

1	Name and Address of Recipient:		7	Fund Ty	Fund Type:	
	Agency Name Fort Tho	mas Independent			State	
	Street Address 28 N Ft 7	Thomas Ave			Federal	
	City, State Zip Fort Tho	mas, KY 41075			Other:	
			8	Method	l of Payment:	
2	KDE Contact Information:	· NO			Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.			Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.			Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601				
			9	Reimbu	rsement Frequency:	
3	Description/Fund Source of A	Award and Fiscal Year:	1		Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality			Other	
	CFDA#	84.367A		H		
	PR/AWARD NUMBER (FAIN)	S367A150016	7			
	MUNIS Project Number	401B	10	Financia	al Reporting Method:	
	MOA Number	N/A			Electronic Submission	
	Pass-through Number	3230002-15				
					Other	
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81				
		ve Requirements, Cost Principles, and Audit Requirem	nents			
	for Federal Awards in 2 CFR P	art 200.				
		PROFICIENT & P	REPAR		OR	
5	REVISED Award Amount:	C II C C	11	The second secon	ions: Districts must annually evaluate the use of teacher	
	\$62,220.00	3 0 6 6			nciple quality funds to ensure they are used to address	
6	Period of Award:				ed needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcom	es.	
		encumbered by September 30, 2017. The quarterly				
12		September 30, 2017 must reflect encumbrances.)				
12	Consortia/Partnership Memb		D., + .'	in a d f = c!	to a consequent of the five of the decorate of the second	
13		ns: The submission of the Teacher Quality Program E	Budget is requ	ired for th	is program. The final federal cash request must be	
	submitted by December 8, 20	J17.				
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: N	Narch 2, 2016	
		Division of Next Generation Professionals				
	L					

1			7	Fund Type:
	Agency Name Frankfor	t Independent		State
	Street Address 506 Wes	t 2nd Street, Suite 2		
	City, State Zip Frankfor	t, KY 40601		Other:
			8	Method of Payment:
2	KDE Contact Information:		7 7 -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	4//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	-	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	_	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	-	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Monthly Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
			1	Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85	11.	
		ve Requirements, Cost Principles, and Audit Requirements		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PRE	PAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$65,839.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13			et is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name /Title).	Pohin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):	Robin Hebert, Director Division of Next Generation Professionals		Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Franklin	County		State
	Street Address 916 E M	ain St		□ Federal
	City, State Zip Frankfor	t, KY 40601		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	1 11 11 -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$227,558.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF EI	outcomes.
		encumbered by September 30, 2017. The quarterly		JOCATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	, · ·	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized Du (Nonce /Title)	Dahia Haharit Director		Data: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Fulton C	ounty		State
	Street Address 2780 Mg	oscow Ave		
	City, State Zip Hickmar	, KY 42050		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	. 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	000	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-6	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$60,166.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		· ·	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized Du (Nove - /Tt)	Dahin Haharit Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	·		7	Fund Type:
		ndependent		State
	Street Address 304 Wes	st State Line		
	City, State Zip Fulton, F	(Y 42041		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	Contract of the Contract of th	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	9	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$38,392.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	JT OF EI	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		· · · · · · · · · · · · · · · · · · ·	udget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Du / Nome / Title \	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Gallatin	,		State
	Street Address 75 Board	dwalk		
	City, State Zip Warsaw,	, KY 41095		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ A N	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I OII
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$73,077.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Pudgot is most i	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	•	Budget is requi	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	y1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Garrard	•		State
	Street Address 322 W N	Лaple St		□ Federal
	City, State Zip Lancaste	er, KY 40444		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$114,255.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		1 (Sept. 1997) - 1 (Sep
42		g September 30, 2017 must reflect encumbrances.)		<u> </u>
12	Consortia/Partnership Memi			
13	_ =		Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	U17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	The state of the s	Division of Next Generation Professionals		
	<u>l</u>	2 Of ITEM GENERALION FOR SHOULD		

1	Name and Address of Recipient:		7	Fund Type:
		Independent		State
	Street Address PO Box 2	1239		
	City, State Zip Glasgow	, KY 42142		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		-, 7	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$113,192.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13			Dudget is reserve	nired for this program. The final federal cash request must be
13	submitted by December 8, 20		Budget is requ	ired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Grant Co	•		State
	Street Address 820 Arni	ie Risen Boulevard		
	City, State Zip Williams	stown, KY 41097		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	5	
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$157,851.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	Self-Your 1 Self-Your Self-York Self
40		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	•	Budget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	Authorized by (Maine) fille).	Division of Next Generation Professionals		54.6. Widtell 2, 2010
	<u> </u>	DIVISION OF NEXT GENERATION FROM STORIALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Graves C	•		State
	Street Address 2290 Sta	ate Rt 121 N		
	City, State Zip Mayfield	d, KY 42066		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UN
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$185,451.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	,,,,,,,,	
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D 1 1 1	
13	_ =		Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
	I .			

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Grayson	County		State
	Street Address PO Box 4	4009		Federal
	City, State Zip Leitchfie	eld, KY 42754		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$249,055.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ived for this was grown. The final foderal seek was week to seek to
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Green Co	,		State
	Street Address PO Box 3	369		
	City, State Zip Greensb	ourg, KY 42743		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I ON
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$93,966.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Sec. (Add 1) 2 (2) (2) (2) (2) (2) (2) (2) (2) (2)
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dudostis as	ined for this program. The final foderal code resource to the
13	•	· •	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Greenup	County		State
	Street Address 45 Musk	eteer Dr		
	City, State Zip Greenup	o, KY 41144		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	. 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15-15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$200,491.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		<i>,</i> — —	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Norse /Title)	Dahin Hahart Director		Date: Morch 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Hancock	•		State
	Street Address 83 State	Rt 271 N		
	City, State Zip Hawesvi	lle, KY 42348		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$71,688.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:		_	identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13			Quidant is mass.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	•	Budget is requ	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Hardin C	•		State
	Street Address 65 W A J	Jenkins Rd		
	City, State Zip Elizabetl	htown, KY 42701		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$509,661.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		Dudos is a	ived for this program. The final foderal seek years at the
13	•		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Harlan C	County		State
	Street Address 251 Ball	Park Rd		
	City, State Zip Harlan, I	(Y 40831		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$458,885.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		r of Er	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		· ·	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date. Widicii 2, 2010
		DIVISION OF NEXT DEHELATION PROTESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Harlan Ir	ndependent		State
	Street Address 420 E Ce	ntral St		□ Federal
	City, State Zip Harlan, I	(Y 40831		Other:
			8	Method of Payment:
2	KDE Contact Information:	. 01/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	0.00	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	9	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	REPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$49,670.00	S U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		JOCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13		· ·	udget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D 1 1 2 2046
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Harrison	County		State
	Street Address 308 Web	oster Ave		
	City, State Zip Cynthiar	na, KY 41031		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$141,622.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	September 30, 2017 must reflect encumbrances.)		
13	•		Quidant is mass.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	· ·	Budget is requ	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	J17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Hart County			State
	Street Address 25 Quali	ty Street		
	City, State Zip Munford	dville, KY 42765		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C		Federal Cash Request
	Program Consultant	Title II Consultants	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiremen	ts	b Comment of the Comm
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$167,734.00	2 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		r of E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	· = ·		lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
1-4	Authorized by (Name/ Inte).	Division of Next Generation Professionals		Date. Walter 2, 2010
		DIVISION OF NEXT DELICIATION FIGURESSIONALS		

1			7	Fund Ty	/pe:
	Agency Name Hazard Independent				State
	Street Address 705 Mai	n Street		\square	Federal
	City, State Zip Hazard,	KY 41701			Other:
			8	Method	d of Payment:
2	KDE Contact Information:				Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.			Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/		Lump Sum
	Street Address	16 th Floor, 500 Mero St.			Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbu	rsement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality			Other
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016	7		
	MUNIS Project Number	401B	10	Financi	al Reporting Method:
	MOA Number	N/A			Electronic Submission
	Pass-through Number	3230002-15			
					Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81			
		ve Requirements, Cost Principles, and Audit Requirem	nents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	has beef it.	OR
5	REVISED Award Amount:	C II C C	11	100	ions: Districts must annually evaluate the use of teacher
	\$66,804.00	3 0 6 6			nciple quality funds to ensure they are used to address
6	Period of Award:				ed needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcom	es. N
		encumbered by September 30, 2017. The quarterly			
12		September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memi		Decelerati	in a different	Commence The Confedence of the
13	_ =	ons: The submission of the Teacher Quality Program E	Budget is requ	lired for th	nis program. The final federal cash request must be
	submitted by December 8, 20	J1/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: N	March 2, 2016
		Division of Next Generation Professionals			,
	L				

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	on County		State
	Street Address 1805 Sec	cond St		
	City, State Zip Henders	on, KY 42420		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$331,148.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ived for this progress. The final foderal each request worth
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Henry Co	· · · · · · · · · · · · · · · · · · ·		State
	Street Address 326 S M	ain St		
	City, State Zip New Cas	tle, KY 40050		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	1 11 11 -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$95,708.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF EI	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		, , , , , , , , , , , , , , , , , , ,	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Norse /Title)	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Hickmar	,		State
	Street Address 416 Wat	erfield Dr		
	City, State Zip Clinton,	KY 42031		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ _^ \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I OII
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$45,322.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		N. Addressed V. Co. State September 2013
40		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi			- 16 16 16 16 16 16 16 16 16 16 16 16 16
13	_ =	· •	Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	U17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	The state of the s	Division of Next Generation Professionals		
	L	2 Of Heat Generation From Continuo		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Hopkins	County		State
	Street Address 320 S Se	minary St		
	City, State Zip Madisor	ville, KY 42431		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	0.00	
		- 1	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$379,441.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	· •	idget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy /News/Title)	Pohin Hahart Director		Data: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Jackson	County		State
	Street Address PO Box 2	217		
	City, State Zip McKee,	KY 40447		Other:
			8	Method of Payment:
2	KDE Contact Information:	and C		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$208,174.00	5 U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly	1 01 1-1	CATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13		•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie		7	Fund Type:
		Independent		State
	Street Address 940 High	nland Ave		□ Federal
	City, State Zip Jackson,	KY 41339		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 12	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$20,946.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		•	ıdget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized Du (Nonce /Tiste)	Dahia Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	,	n County		State
	Street Address PO Box 3	34020		□ Federal
	City, State Zip Louisville	e, KY 40232		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	MIN -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	-	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
-	, , , , , , , , , , , , , , , , , , , ,	ive Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	FPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$4,508,155.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:		-	identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly	01 1-1	DOCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	bers:		
13	Special Instructions/Condition	ons: The submission of the Teacher Quality Program Bud	get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		Fund Type:
	Agency Name Jenkins Independent		State
	Street Address PO Box 74		
	City, State Zip Jenkins, KY 41537		Other:
		8	Method of Payment:
2	KDE Contact Information:	OV CITY	Federal Cash Request
	Program Consultant <u>Title II Consultants</u>	4.46U;//	Expenditure Reimbursement
	Street Address 19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact Stephanie Mack, 502-564-1979 Ext	4306	Lump Sum
	Street Address 16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, KY 40601	-54-	
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description FY2016 Title II, Part A Improving Te		Quarterly
	Fund Source Title II, Part A Improving Teacher Q	uality	Other
	CFDA# 84.367A		
	PR/AWARD NUMBER (FAIN) S367A150016		
	MUNIS Project Number 401B	10	Financial Reporting Method:
	MOA Number N/A	-	Electronic Submission
	Pass-through Number 3230002-15		
			Other
4	Grant Authority (Source): NCLB, Title II, Part A, EDGAR 34 CFR Par	ts 76, 77, 79, 81 & 85	
	and the Uniform Administrative Requirements, Cost Principles, and	d Audit Requirements	
	for Federal Awards in 2 CFR Part 200.	0.0	
	PROFICIE	NT & PREPAR	ED FOR
5	REVISED Award Amount:		Evaluations: Districts must annually evaluate the use of teacher
	\$52,007.00		and principle quality funds to ensure they are used to address
6	Period of Award:	100.00	identified needs and are effective in producing the desired
	July 1, 2015 – September 30, 2017	DEPARTMENT OF E	outcomes.
	(All funds must be spent or encumbered by September 30, 2017		
4.0	report for the period ending September 30, 2017 must reflect en	ncumbrances.)	
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: The submission of the Teacher C	Quality Program Budget is requi	red for this program. The final federal cash request must be
	submitted by December 8, 2017.		
14	Authorized By (Name/Title): Robin Hebert, Director		Date: March 2, 2016
	Division of Next Generation Profess	ionals	546. Widi (11 2, 2010
	Bivision of Next Generation From		

1	Name and Address of Recipie	ent:	7	Fund Type:
	,	ne County		State
	Street Address 871 Wilr	more Rd		
	City, State Zip Nicholas	ville, KY 40356		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 12	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$276,009.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		•	ıdget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Nove / Title)	Dahin Hahart Director		Date: Morch 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Johnson	•		State
	Street Address 253 N M	ayo Tr		□ Federal
	City, State Zip Paintsvil	le, KY 41240		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	. 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	100	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$269,881.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		JOCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13		<i>,</i> — —	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Ty	oe:
	Agency Name Kenton (County			State
	Street Address 1055 Ear	ton Dr		\boxtimes	Federal
	City, State Zip Fort Wri	ght, KY 41017			Other:
			8	l —	of Payment:
2	KDE Contact Information:	- DV			Federal Cash Request
	Program Consultant	Title II Consultants			Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.			Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306			Lump Sum
	Street Address	16 th Floor, 500 Mero St.	7 -		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601			
			9		sement Frequency:
3	Description/Fund Source of A				Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality			Other
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10		Reporting Method:
	MOA Number	N/A	/		Electronic Submission
	Pass-through Number	3230002-15			
					Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	§ 85		
		ve Requirements, Cost Principles, and Audit Requirement	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	EDF	OR
5	REVISED Award Amount:	$c \mid l \mid c \mid c$	11	The second secon	ons: Districts must annually evaluate the use of teacher
	\$358,553.00	3 0 6 6		Application of the second	ciple quality funds to ensure they are used to address
6	Period of Award:		_		d needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcome	SON
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Meml	s September 30, 2017 must reflect encumbrances.)			
13		ons: The submission of the Teacher Quality Program B	udaat is raau	ired for thi	s program. The final federal cash request must be
13	submitted by December 8, 20		uuget is requ	ii eu ioi tiii	s program. The inial lederal cash request must be
	Janimeted by December 0, 20	·-··			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: M	arch 2, 2016
		Division of Next Generation Professionals			
			-		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Knott Co	punty		State
	Street Address PO Box 8	369		
	City, State Zip Hindmai	n, KY 41822		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$265,209.00	5 U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		OCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Bud	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
	4 .1 . 15 /6. /	B.I. H.I. & B.		D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Knox Co	•		State
		iel Boone Dr		□ Federal
	City, State Zip Barbour	ville, KY 40906		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	T- C	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		_
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$440,524.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/ Hite):	Division of Next Generation Professionals		Date. Ivial CII 2, 2010
		DIVISION OF NEXT DEHELATION FLORESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name LaRue Co	•		State
	Street Address 208 Coll	ege St		
	City, State Zip Hodgen	ville, KY 42748		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	the same	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$113,130.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:		-	identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		OCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Bu	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
	4 .1 . 15 /6. /			D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Laurel C	·		State
	Street Address 718 Nor	th Main Street		
	City, State Zip London,	KY 40741		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	WW.	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	Cong.	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$533,057.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	r of Er	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		<i>,</i> — —	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy (Nome /Title)	Pohin Hohart Director		Data: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
	1	Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	,	e County		State
	Street Address 50 Bulld	og Ln		
	City, State Zip Louisa, k	YY 41230		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	III -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.	44//	Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$220,258.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	•	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Norse /Title)	Dahin Hahart Director		Data: Morch 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Lee Cou	•		State
	Street Address PO Box 6	568		
	City, State Zip Beattyvi	lle, KY 41311		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		72	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$124,578.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13			Quidant in magni	red for this program. The final federal cash request must be
13	submitted by December 8, 20	•	Budget is requi	red for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Leslie County			State
	Street Address PO Box 9	949		Federal
	City, State Zip Hyden, I	KY 41749		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ A N	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ive Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$207,857.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		Dudaatia na	wined for this program. The final foderal each request worth
13	•		Buaget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		,

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Letcher	•		State
	Street Address 224 Park	< St		Federal
	City, State Zip Whitesb	urg, KY 41858		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$286,557.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Security Sec
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dudos is a	ined for this progress. The final foderal each request accepts
13	•		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Lewis Co	punty		State
	Street Address PO Box 1	159		□ Federal
	City, State Zip Vancebu	ırg, KY 41179		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	No.	
		- 13	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$182,429.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF FI	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		, , , , , , , , , , , , , , , , , , ,	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Nove / Title)	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Lincoln (•		State
	Street Address PO Box 2	265		□ Federal
	City, State Zip Stanford	I, KY 40484		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		72	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$247,959.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==# != #= !	ined for this program. The final foderal each required to the
13	-	· ·	Buaget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
		on County		State
	Street Address PO Box 2	219		
	City, State Zip Smithlar	nd, KY 42081		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I ON
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$68,919.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Specification of the Control of the
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this progress. The final foderal sech represent the
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Logan Co	•		State
	Street Address PO Box 4	417		
	City, State Zip Russelly	ille, KY 42276		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ive Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$153,429.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D., d. a. a. a	ined for this program. The final foderal cook required to the
13	•		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie		7	Fund Type:	
		ndependent		State	
	Street Address 525 Elm	St			
	City, State Zip Ludlow,	KY 41016		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- DV		Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15		_	
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	& 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ILD I OIL	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher	er
	\$42,796.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly			
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memb)d==+ i= ==	uined for this program. The final foderal cock required to	
13	•	, , , , , , , , , , , , , , , , , , ,	suaget is requ	uired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,	
				-	

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Lyon Co	unty		State
	Street Address 217 Jenk	rins Rd		□ Federal
	City, State Zip Eddyville	e, KY 42038		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	0.00	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-6	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$42,380.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		, · ·	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized Du (Nome /Title)	Dahin Haharit Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Madison County			State
	Street Address PO Box 7	768		
	City, State Zip Richmor	nd, KY 40475		Other:
			8	Method of Payment:
2	KDE Contact Information:	a DVC	WW -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	-	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
			11	Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirements		
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PRI	EPAR	ED FOR
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$446,048.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		MANUSCO STORY SERVICE
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	'='		et is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
17	Additionized by (Name) fille).	Division of Next Generation Professionals		Dutc. Widien 2, 2010
L		Division of Next Generation Floressionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	n County		State
	Street Address PO Box 2			
	City, State Zip Salyersv	ille, KY 41465		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$242,560.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi)d==# != #= !	ined for this was guess. The final foderal cook was guest worth
13	•	•	Buaget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Marion (•		State
	Street Address 755 E M	ain St		
	City, State Zip Lebanon	n, KY 40033		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$165,749.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this program. The final foderal cosh required worth
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
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1	•		7	Fund Type:
	Agency Name Marshal	l County		State
	Street Address 86 High	School Rd		□ Federal
	City, State Zip Benton,	KY 42025		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	No.	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$190,187.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF FI	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		, , , , , , , , , , , , , , , , , , ,	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Nove / Title)	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Martin C	County		State
	Street Address 104 E M	ain St		
	City, State Zip Inez, KY	41224		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V C	III -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
			1	Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
'	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P		.5	
		PROFICIENT & PR	FPAR	FD FOR
5	REVISED Award Amount:	6 11 6 6	11	Evaluations: Districts must annually evaluate the use of teacher
	\$204,525.00	SUCC		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	Of ILL	OCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Bud	get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Mason C	•		State
	Street Address PO Box 1	130		Federal
	City, State Zip Maysvill	e, KY 41056		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I ON
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$158,706.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Specification of the control of the
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this progress. The final foderal seek represent to
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
		d Independent		State
	Street Address 914 East	: College St		
	City, State Zip Mayfield	d, KY 42066		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ _^ \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$94,767.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF ED	outcomes.
		encumbered by September 30, 2017. The quarterly	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dudmat in me	ived for this program. The final foderal cook required to
13	•	· •	Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	ken County		State
	Street Address 435 Berg	ger Rd		Federal
	City, State Zip Paducah	, KY 42001		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I ON
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$241,237.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Oudget is record	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	, , , , , , , , , , , , , , , , , , ,	suaget is requ	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	V1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name McCrear	y County		State
	Street Address 120 Raid	ler Way		□ Federal
	City, State Zip Stearns,	KY 42647		Other:
			8	Method of Payment:
2	KDE Contact Information:	and C		Federal Cash Request
	Program Consultant	Title II Consultants	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	T- C	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$313,080.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	1 01 1=1	CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.0	Authorized D. (Nome /Title)	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name McLean	County		State
	Street Address PO Box 2	245		
	City, State Zip Calhoun	, KY 42327		Other:
			8	Method of Payment:
2	KDE Contact Information:		WW -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-18-	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirement	:s	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PR	<i>EPAR</i>	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$81,281.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	50.0	8.000 (100 (100 (100 (100 (100 (100 (100
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13	_		get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
17	Additionized by (Name) fille).	Division of Next Generation Professionals		Dutc. March 2, 2010
L		DIVISION OF NEXT GENERALION FIGURESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Meade (County		State
	Street Address 1155 Old	d Ekron Rd		
	City, State Zip Branden	burg, KY 40108		Other:
			8	Method of Payment:
2	KDE Contact Information:		MIN -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-11	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirement	s	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$197,230.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	52.5	8.000 (100 Tec.) (100
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			- 4 4 4
13	'='		get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
17	Additionized by (Name) fille).	Division of Next Generation Professionals		Dutc. March 2, 2010
L		Division of Next Generation Frotessionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Menifee	•		State
	Street Address 202 Back	k St., PO Box 110		□ Federal
	City, State Zip Frenchb	urg, KY 40322		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	9	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	2 85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requirements		
	for Federal Awards in 2 CFR P			
		PROFICIENT & P	REPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$81,818.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:		-	identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly	41 OI L	CATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ons: The submission of the Teacher Quality Program B	udget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
		B.I. H.I. I. B.		D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Mercer (County		State
	Street Address 371 E Le	exington St.		
	City, State Zip Harrods	burg, KY 40330		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ive Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$146,219.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		See Greek 1 S 10 C 17 S AC 17 C L
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi)dma# to ust	and for this program. The final foderal cosh persons to
13	•	· •	Buaget is requi	red for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Metcalfe	•		State
	Street Address 109 Sart	in Dr		□ Federal
	City, State Zip Edmonto	on, KY 42129		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	" II II -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	· · · · · · · · · · · · · · · · · · ·		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$114,080.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		r of E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		, , , , , , , , , , , , , , , , , , ,	lget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/ Inte):	Division of Next Generation Professionals		Date. Ivial CII 2, 2010
L		DIVISION OF NEXT GENERATION FLORESSIONALS		

1	Name and Address of Recipient:		Fund Type:
	Agency Name Middlesboro Independent		State
	Street Address PO Box 959		
	City, State Zip Middlesboro, KY 40965		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant <u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address 19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address 16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip Frankfort, KY 40601	-	
		9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:	1	Monthly
	Description FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source Title II, Part A Improving Teacher Quality		Other
	CFDA# 84.367A		
	PR/AWARD NUMBER (FAIN) S367A150016	7	
	MUNIS Project Number 401B	10	Financial Reporting Method:
	MOA Number N/A		Electronic Submission
	Pass-through Number 3230002-15		
			Other
4	Grant Authority (Source): NCLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrative Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR Part 200.		
	PROFICIENT & P	'REPAR	ED FOR
5	REVISED Award Amount:	11	Evaluations: Districts must annually evaluate the use of teacher
	\$115,940.00		and principle quality funds to ensure they are used to address
6	Period of Award:		identified needs and are effective in producing the desired
	July 1, 2015 – September 30, 2017 KENTUCKY DEPARTME	NT OF E	outcomes.
	(All funds must be spent or encumbered by September 30, 2017. The quarterly		- 94/03/P (10/07/2009)
	report for the period ending September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: The submission of the Teacher Quality Program E	Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 2017.		
14	Authorized By (Name/Title): Robin Hebert, Director		Date: March 2, 2016
	Division of Next Generation Professionals		
<u> </u>	1 2.1.3.5 31 New Seneration 1 10163310/1015		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Monroe	•		State
	Street Address 309 Emb	perton Street		□ Federal
	City, State Zip Tompkir	sville, KY 42167		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 6V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	100	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	₹ 85	
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requirements		
	for Federal Awards in 2 CFR P			
		PROFICIENT & P.	RFPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$123,299.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	AT OF EI	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly	41 01 11	CATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml	pers:		
13		· ·	udget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
	A .1 . 15 /a. /=::.	B.I. H.I. I. B.		D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
		mery County		State
	Street Address 700 Woo	odford Drive		
	City, State Zip Mount S	terling, KY 40353		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	"	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	The same of the sa	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	T- B	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	85	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$203,227.00	5 U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy / News /Title)	Pohin Hohart Director		Data: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
	1	Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Morgan	County		State
	Street Address 212 Univ	versity Dr		Federal
	City, State Zip West Lib	perty, KY 41472		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$188,919.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		See
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dudostions	ined for this progress. The final foderal each removed words
13	•	· •	Budget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,

1	Name and Address of Recipie	ent:	7	Fund Type:
		perg County		State
	Street Address 510 W N	lain Street		
	City, State Zip Powderl	y, KY 42367		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 1	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-		ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PE	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$291,406.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		CATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13		•	ıdget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
		Independent		State
	Street Address 208 S 13	th St		Federal
	City, State Zip Murray,	KY 42071		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I ON
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$62,183.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Specification of the control of the
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this progress. The final foderal sech represent to
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Nelson C	•		State
	Street Address PO Box 2	2277		Federal
	City, State Zip Bardstov	wn, KY 40004		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$192,229.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Dudgot is mass.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20		Budget is requ	aired for this program. The final federal cash request must be
	Submitted by December 8, 20	y1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Newpor	t Independent		State	
	Street Address 301 E Eig	ghth St			
	City, State Zip Newpor	t, KY 41071		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- OV (Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	- 6 //	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		72	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85		
		ve Requirements, Cost Principles, and Audit Requireme	nts	b	
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	$c \mid l \mid c \mid c$	11	Evaluations: Districts must annually evaluate the use of teach	
	\$242,501.00	3 0 6 6		and principle quality funds to ensure they are used to addres	S
6	Period of Award:		-	identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		IT OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13			idget is real	uired for this program. The final federal cash request must be	
13	submitted by December 8, 20		iuget is requ	ined for this program. The final rederal cash request must be	
	Janimeted by December 0, 20	·-··			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
		Division of Next Generation Professionals			

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Nicholas	•		State
	Street Address 395 W N	lain St		□ Federal
	City, State Zip Carlisle,	KY 40311		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV C	No.	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	6	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8.	5	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:		11	Evaluations: Districts must annually evaluate the use of teacher
	\$75,111.00	2 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	0 1 1111	
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		, , , , , , , , , , , , , , , , , , ,	get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy /Nome /Title)	Pohin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Ohio County			State	
	Street Address PO Box 7	70			
	City, State Zip Hartford	I, KY 42347		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	anV (Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	461//	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601	-		
			9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A	/	Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	& 85		,
		ve Requirements, Cost Principles, and Audit Requirem	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED FOR	
5	REVISED Award Amount:	$c \cup c \subset c$	11	Evaluations: Districts must annually evaluate the use of	
	\$225,449.00	3 0 6 6		and principle quality funds to ensure they are used to ad	
6	Period of Award:		-	identified needs and are effective in producing the desire	a d
	July 1, 2015 – September 30,		NT OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly september 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13			ludget is real	ired for this program. The final federal cash request must	he
13	submitted by December 8, 20		oduget is requ	Ted for this program. The final federal cash request must	, DE
	Janimeted by December 0, 20	·-··			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
		Division of Next Generation Professionals			
					·

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Oldham	•		State
	Street Address 6165 W	Hwy 146		
	City, State Zip Crestwo	od, KY 40014		Other:
			8	Method of Payment:
2	KDE Contact Information:	101		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	5-	
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$210,451.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13	·		Dudget is reservi	ired for this program. The final federal cash request must be
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	Budget is requi	ired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		•

1	Name and Address of Recipient:		7	Fund Type:	
	Agency Name Owen Co	ounty		State	
	Street Address 1600 Hw	yy 22 E		□ Federal	
	City, State Zip Owento	n, KY 40359		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- DV C	" II II -	Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601	the same of		
			9	Reimbursement Frequency:	
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	85		
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requiremen			
	for Federal Awards in 2 CFR P	The state of the s			
		PROFICIENT & PR	FPAR	FD FOR	
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$104,783.00	S U C C		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly	1 01 1-1	JOCATION	
	report for the period ending	September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memb	pers:		· · · · · · · · · · · · · · · · · · ·	
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Buc	dget is requ	ired for this program. The final federal cash request must be	
	submitted by December 8, 20	017.			
	4 .1 . 15 /6. /	B.I. H.I. A.B.		D	
14	Authorized By (Name/Title):			Date: March 2, 2016	
		Division of Next Generation Professionals			

1	Name and Address of Recipie		7	Fund Type:
		oro Independent		State
	Street Address 450 Grif	fith Avenue		Federal
	City, State Zip Owensb	oro, KY 42302		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	5	
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$318,306.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	7	Security Sec
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		5 L	- 16 di
13	_ =		Budget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
	I .			

1	Name and Address of Recipie	ent:	7	Fund 1	Гуре:
	Agency Name Owsley 0	County			State
	Street Address PO Box 3	340		\boxtimes	Federal
	City, State Zip Boonevi	lle, KY 41314			Other:
			8		od of Payment:
2	KDE Contact Information:	- OV /			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.			Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306			Lump Sum
	Street Address	16 th Floor, 500 Mero St.	7 -		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601			
			9		ursement Frequency:
3	Description/Fund Source of A				Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality			Other
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10		ial Reporting Method:
	MOA Number	N/A			Electronic Submission
	Pass-through Number	3230002-15			
					Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	k 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requireme	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	ED I	FOR
5	REVISED Award Amount:	$c \cup c \subset c$	11	100	tions: Districts must annually evaluate the use of teacher
	\$102,751.00	3 0 6 6		4000000	inciple quality funds to ensure they are used to address
6	Period of Award:				ied needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outco	mes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)			
13	•	ons: The submission of the Teacher Quality Program Bu	udant is res	ired for	this program. The final federal each request must be
13	submitted by December 8, 20		uuget is reqi	iirea ior	tins program. The final federal cash request must be
	Submitted by Determiner 6, 20	y±/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date:	March 2, 2016
		Division of Next Generation Professionals			

1	Name and Address of Recipie		7	Fund Type:
		Independent		State
	Street Address PO Box 2	2550		□ Federal
	City, State Zip Paducah	, KY 42003		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiren	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$260,321.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		Dood and in a	the different bis and a second of the district bis district.
13	_ =	· · · · · · · · · · · · · · · · · · ·	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	, (Division of Next Generation Professionals		,
	I .			

1	Name and Address of Recipie		7	Fund Type:
	Agency Name Paintsvil	le Independent		State
	Street Address 305 2nd	St		Federal
	City, State Zip Paintsvil	le, KY 41240		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 01/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	ents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$37,932.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		500 (MA) V 500 (V 500 (MA) (V 500)
12		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			ined for this consequent The final ford 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
13	•	, · ·	suaget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J17.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
<u> </u>				

1	Name and Address of Recipie	ent:	7	Fund Type:
		lependent		State
	Street Address 310 W S	eventh St		
	City, State Zip Paris, KY	40361		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	/ A \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UI
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$59,656.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Dudgot is rose:	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	· •	Budget is requi	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	y1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	<i>,</i>	on County		State
	Street Address 2525 Hw	vy 27 N		□ Federal
	City, State Zip Falmout	h, KY 41040		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	" II II -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$127,674.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy / News /Title)	Pohin Hohart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
	1	Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Perry Co	unty		State
	Street Address 315 Park	: Ave		□ Federal
	City, State Zip Hazard,	KY 41701		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	MW-	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	-	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85	11.	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requirements		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PRI	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$364,253.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	U 1 1 1	
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		, , , , , , , , , , , , , , , , , , ,	et is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy / News /Title)	Pohin Hohart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
	1	Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Pike Cou	•		State
	Street Address 316 S Ma	•		
	City, State Zip Pikeville	, KY 41502		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		7	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UII
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$710,748.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		1 Sec. (1987) - 1 Sec. (1984) - 1 Sec. (1984)
42		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13	•	· ·	Budget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
		Independent		State
	Street Address 148 Seco	ond St		□ Federal
	City, State Zip Pikeville	, KY 41501		Other:
			8	Method of Payment:
2	KDE Contact Information:	.01/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	9	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	RFPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$83,515.00	S U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	JT OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly	41 OI L	JOCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb	pers:		
13	Special Instructions/Condition	ns: The submission of the Teacher Quality Program Bu	udget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
				D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie		7	Fund Type:
		Independent		State
	Street Address 401 Virg	inia Ave		Federal
	City, State Zip Pineville	, KY 40977		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$42,988.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Dudgot is mass.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20		Budget is requ	aired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Powell C	ounty		State
	Street Address PO Box 4	130		
	City, State Zip Stanton,	KY 40380		Other:
			8	Method of Payment:
2	KDE Contact Information:	-01/6	No.	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HII/	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	_	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	35	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requiremen	ts	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$169,629.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		MANUSET STORY SERVICE
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_		get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
17	Additionized by (Maine/ Title).	Division of Next Generation Professionals		butc. Waren 2, 2010
L		DIVISION OF WEAR GENERALION FIGURESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Pulaski (•		State
	Street Address PO Box 2	1055		
	City, State Zip Somerse	et, KY 42502		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		72	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15		
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$440,391.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi)d==# != #= !	ined for this was guess. The final foderal cook was guest worth
13	•	· ·	Buaget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		•

1	Name and Address of Recipie		7	Fund Type:
		d Independent		State
	Street Address 600 Ram	n Blvd		
	City, State Zip Raceland	d, KY 41169		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$36,741.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Quidant is mass.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	•	Budget is requ	aired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	on County		State
	Street Address PO Box 1	108		
	City, State Zip Mount C	Dlivet, KY 41064		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$23,300.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this program. The final foderal seek years at the
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•

1	Name and Address of Recipie	ent:	7	Fund Type:
		tle County		State
	Street Address 245 Rich	mond St		□ Federal
	City, State Zip Mount V	/ernon, KY 40456		Other:
			8	Method of Payment:
2	KDE Contact Information:	. 01/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.	4///	Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	000	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	RFPAR	FD FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$193,608.00	S U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly		JOCATION
	report for the period ending	September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml	pers:		
13		· · · · · · · · · · · · · · · · · · ·	udget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
	A .1 . 15 /a. /=::.			D
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Rowan C	County		State
	Street Address 121 E Se	cond St		Federal
	City, State Zip Morehea	ad, KY 40351		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I ON
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$185,736.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Specification of the Control of the
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this progress. The final foderal each request worth
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Russell C	•		State
	Street Address 404 S. M	lain St.		
	City, State Zip Jamesto	wn, KY 42629		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	. 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	the same	
		- 1	9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1-1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	, , , , , , , , , , , , , , , , , , , ,	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$174,182.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		CATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13		, , , , , , , , , , , , , , , , , , ,	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized Du (Nonce /Tiste)	Dahin Hahart Director		Data: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	<i>,</i>	ndependent		State
	Street Address 409 Belf	ont St		□ Federal
	City, State Zip Russell,	KY 41169		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V C	WW -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
-	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$81,396.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	U 1 1 1	
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		•	get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy (Nome /Title)	Pohin Hohart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
	1	Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
		ille Independent		State
	Street Address 355 S Su	mmer St		
	City, State Zip Russelly	ille, KY 42276		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV (Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	.H//	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	1	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PI	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$54,365.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		• •	ıdget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized D. (Norse /Title)	Dahin Hahart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	Hill Independent		State
	Street Address 6007 N I	Hwy 27		Federal
	City, State Zip Science	Hill, KY 42553		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A	/	Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ive Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$12,336.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		5 SM (MM) 5 900 (MM) (MM)
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D., d. a. b. i.a. u	ined for this was grown. The final fordered each was rest to the
13	•		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		,

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name Scott County			State
	Street Address PO Box 5	578		□ Federal
	City, State Zip Georget	own, KY 40324		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	WW -	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirements	5	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & PRI	EPAR	ED FOR
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$235,752.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	'='	· · · · · · · · · · · · · · · · · · ·	et is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/ Inte).	Division of Next Generation Professionals		Date. March 2, 2010
		PINISION OF MENT DELICIATION FIGURESSIONAIS		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Shelby C			State
	Street Address PO Box 2	159		Federal
	City, State Zip Shelbyvi	ille, KY 40066		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- 7	9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ive Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$192,605.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memi		D., deskie us	wined for this was grown. The final fordered each was west accept to
13	•		Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals		,

1	Name and Address of Recipie	ent:	7	Fund Type:
	o ,	ove Independent		State
	Street Address PO Box 4	400		□ Federal
	City, State Zip Silver Gr	ove, KY 41085		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ILD I UII
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$7,276.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Dudget is re	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	, , , , , , , , , , , , , , , , , , ,	Budget is requ	uired for this program. The final federal cash request must be
	Submitted by December 8, 20	y1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,

1	Name and Address of Recipie	ent:	7	Fund Type:	
	Agency Name Simpson	•		State	
	Street Address 430 Sout	th College Street		Federal	
	City, State Zip Franklin,	, KY 42135		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	10V		Federal Cash Request	
	Program Consultant	Title II Consultants		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
			9	Reimbursement Frequency:	
3	Description/Fund Source of A		25	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR		
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher	
	\$126,675.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		Security Control and Control	
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memb)d==+ i= ==	ined for this program. The final foderal cosh respect worth	
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•	
				-	

1	Name and Address of Recipie	ent:	7	Fund Type:
		et Independent		State
	Street Address 305 N Co	ollege St		□ Federal
	City, State Zip Somerse	et, KY 42502		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V C	II II -	Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85	5	
		ive Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PRI	EPAR	ED FOR
5	REVISED Award Amount:		11	Evaluations: Districts must annually evaluate the use of teacher
	\$79,608.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13	_ =	, ,	et is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy /News/Title)	Pohin Hohart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
		te Independent		State
	Street Address Wm Blat	t and Evergreen		□ Federal
	City, State Zip Southga	te, KY 41071		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C	"	Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	RIII	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	_	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	85	
-		ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$10,262.00	2000		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy (Nome /Title)	Pohin Hohart Director		Date: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Spencer	County		State
	Street Address 207 W N	fain St		
	City, State Zip Taylorsv	ille, KY 40071		Other:
			8	Method of Payment:
2	KDE Contact Information:	- DV C		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	. 14 //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		120	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requiremen		
	for Federal Awards in 2 CFR P	The state of the s		
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$79,055.00	5 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	T OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		•	dget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
1.4	Authorized Dy (News /Title)	Pohin Hohart Director		Data: March 2 2016
14	Authorized By (Name/Title):			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Taylor C	ounty		State
	Street Address 1209 E B	roadway		□ Federal
	City, State Zip Campbe	llsville, KY 42718		Other:
			8	Method of Payment:
2	KDE Contact Information:	- OV /		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	- 15/ //	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
	· · · · · · · · · · · · · · · · · · ·	ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P		*	
		PROFICIENT & PR	REPAR	ED FOR
5	REVISED Award Amount:	CILCC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$99,922.00	2 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:		~ ~	identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		IT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		•	ıdget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Additionized by (Name/ Title):	Division of Next Generation Professionals		Date. Ivial CII 2, 2010
L	1	DIVISION OF NEXT DEHELOUNT FIORESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund T	ype:
	Agency Name Todd Co	unty			State
	Street Address 205 Airp	ort Rd		\boxtimes	Federal
	City, State Zip Elkton, k	(Y 42220			Other:
			8	l —	d of Payment:
2	KDE Contact Information:	- DV /			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		14	Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306			Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601			
			9		ursement Frequency:
3	Description/Fund Source of A				Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality			Other
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10		al Reporting Method:
	MOA Number	N/A	/		Electronic Submission
	Pass-through Number	3230002-15			
					Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	§ 85		
		ve Requirements, Cost Principles, and Audit Requireme	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	EDF	OR
5	REVISED Award Amount:	$c \cup c \subset c$	11	1000	tions: Districts must annually evaluate the use of teacher
	\$108,173.00	3 0 6 6		46000000	nciple quality funds to ensure they are used to address
6	Period of Award:				ed needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcom	nes.
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)			
13	•	ons: The submission of the Teacher Quality Program B	udgot is ross	irod for +1	his program. The final federal such request must be
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	uaget is requ	iirea ior ti	nis program. The final federal cash request must be
	Submitted by Determiner 6, 20	y±/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: 1	March 2, 2016
		Division of Next Generation Professionals			

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Trigg Co			State
	Street Address 202 Mai	n St		□ Federal
	City, State Zip Cadiz, K	Y 42211		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V C	MI -	Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		5-12	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 8	5	
	• • • • • • • • • • • • • • • • • • • •	ve Requirements, Cost Principles, and Audit Requirement		
	for Federal Awards in 2 CFR P			
		PROFICIENT & PR	EPAR	ED FOR
5	REVISED Award Amount:		11	Evaluations: Districts must annually evaluate the use of teacher
	\$97,109.00	2066		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Meml			
13		· · · · · · · · · · · · · · · · · · ·	get is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
14	Authorized by (Name/Title):	Division of Next Generation Professionals		Date: Wartin 2, 2010
		DIVISION OF NEXT DEHELATION PLOIESSIONALS		

1	Name and Address of Recipie	ent:	7	Fund Type:	
	Agency Name Trimble	,		State	
	Street Address PO Box 2	275			
	City, State Zip Bedford,	, KY 40006		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	- nV		Federal Cash Request	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement	
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor	
	City, KY Zip	Frankfort, KY 40601			
		- V	9	Reimbursement Frequency:	
3	Description/Fund Source of A			Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016	7		
	MUNIS Project Number	401B	10	Financial Reporting Method:	
	MOA Number	N/A		Electronic Submission	
	Pass-through Number	3230002-15			
				Other	
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8			
		ve Requirements, Cost Principles, and Audit Requirem	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR		
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teache	<u>r</u>
	\$67,508.00	3 0 6 6		and principle quality funds to ensure they are used to address	
6	Period of Award:			identified needs and are effective in producing the desired	
	July 1, 2015 – September 30,		NT OF E	outcomes.	
		encumbered by September 30, 2017. The quarterly		50 Sept 1 3 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5	
12		g September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Memb		Name to see	wined for this program. The final federal cosh program to the	
13	•	, ,	suaget is requi	uired for this program. The final federal cash request must be	
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,	

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Union Co	ounty		State
	Street Address 510 S Ma	art St		
	City, State Zip Morgant	field, KY 42437		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	*	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		15	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	1 . \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I UI
5	REVISED Award Amount:	CIICC	11	Evaluations: Districts must annually evaluate the use of teacher
	\$128,125.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		1 (State 1997) 1 (Sta
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb		Dudos is no sud	ived for this presence. The final foderal each required to the
13	•	· •	Budget is requ	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
	,	Verona Independent		State
	Street Address 16 School	ol Rd		
	City, State Zip Walton,	KY 41094		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
		- V	9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$47,459.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memi	s September 30, 2017 must reflect encumbrances.)		
13	·		Dudget is reserve	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	Budget is requ	ired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		·
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1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Warren	,		State
	Street Address PO Box 5	51810		
	City, State Zip Bowling	Green, KY 42102		Other:
			8	Method of Payment:
2	KDE Contact Information:	4 DV		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I ON
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$454,853.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		Specimen 3 (00000000000000000000000000000000000
12		g September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb)d==+ i= ==	ined for this program. The final fodouble solven and the second by
13	•	•	Buaget is requi	uired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		,
				-

1	Name and Address of Recipie	ent:	7	Fund Type:
		gton County		State
	Street Address PO Box 7	72		
	City, State Zip Springfie	eld, KY 40069		Other:
			8	Method of Payment:
2	KDE Contact Information:	10/1		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$94,248.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly	,	1 Sec. 2007 1 Sec. 200 200
42		g September 30, 2017 must reflect encumbrances.)		<u></u>
12	Consortia/Partnership Memi		D 1 1.	
13	_ =	· · · · · · · · · · · · · · · · · · ·	Budget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	UI/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		···· -,
	I .			

1	Name and Address of Recipie	ent:	7	Fund Ty	ype:
	Agency Name Wayne (County			State
	Street Address 1025 Ma	ain St			Federal
	City, State Zip Montice	llo, KY 42633			Other:
			8	l —	d of Payment:
2	KDE Contact Information:	- OV			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>			Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.			Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306			Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601			
			9	l	rsement Frequency:
3	Description/Fund Source of A				Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality			Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality			Other
	CFDA#	84.367A		11	
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10		al Reporting Method:
	MOA Number	N/A			Electronic Submission
	Pass-through Number	3230002-15			
					Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	§ 85		
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requireme	ents		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	EDF	OR
5	REVISED Award Amount:	$c \cup c \subset c$	11	100	ions: Districts must annually evaluate the use of teacher
	\$266,736.00	3 0 6 6		Approximate to	nciple quality funds to ensure they are used to address
6	Period of Award:				ed needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcom	es. N
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly			
12	Consortia/Partnership Memi	g September 30, 2017 must reflect encumbrances.)			
12			dgot != ===	inad famili	nic program. The final federal cash results to see he
13	_	ons: The submission of the Teacher Quality Program B	uaget is reqi	irea for tr	nis program. The final federal cash request must be
	submitted by December 8, 20	UI/.			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: N	March 2, 2016
	,, , , , , , , , , , , , , , , , , , , ,	Division of Next Generation Professionals			<i>,</i>
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1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Webster	County		State
	Street Address 28 State	Rt 1340		
	City, State Zip Dixon, K	Y 42409		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A		25	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4		CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81		
		ve Requirements, Cost Principles, and Audit Requirem	nents	b control of the cont
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	LD I UN
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$109,781.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		<u></u>
13	•		Quidant is rose.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	•	Budget is requi	ared for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•
				-

1	Name and Address of Recipient:		7	Fund Type:
	Agency Name West Point Independent			State
	Street Address PO Box 3	367		Federal
	City, State Zip West Po	int, KY 40177		Other:
			8	Method of Payment:
2	KDE Contact Information:	- 01/		Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/ _	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601	-	
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:		Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016	7	
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15	. \	
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 8	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	ents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED FOR
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$16,286.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		1 (Sept. 1997) - 3 (Sep
12		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			in discretic and many The Smaller deal of the second
13	•	, , , , , , , , , , , , , , , , , , ,	suaget is requ	ired for this program. The final federal cash request must be
	submitted by December 8, 20	J1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
		Division of Next Generation Professionals		
<u> </u>				

1	Name and Address of Recipie	ent:	7	Fund Type:
	Agency Name Whitley			State
	Street Address 300 Mai	n St		
	City, State Zip Williams	sburg, KY 40769		Other:
			8	Method of Payment:
2	KDE Contact Information:	10V		Federal Cash Request
	Program Consultant	Title II Consultants		Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	/	Lump Sum
	Street Address	16 th Floor, 500 Mero St.	-	Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A			Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85	
	and the Uniform Administrati	ve Requirements, Cost Principles, and Audit Requirem	nents	
	for Federal Awards in 2 CFR P	art 200.		
		PROFICIENT & P	REPAR	ED I UI
5	REVISED Award Amount:	C II C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$337,949.00	3 0 6 6		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,		NT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		
12	Consortia/Partnership Memb	s September 30, 2017 must reflect encumbrances.)		
13	•		Quidant is rose.	uired for this program. The final federal cash request must be
13	submitted by December 8, 20	•	Budget is requi	ired for this program. The final federal cash request must be
	Submitted by December 8, 20	U1/.		
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Division of Next Generation Professionals		•

1	Name and Address of Recipient:	7	Fund Type:
	Agency Name Williamsburg Independent		State
	Street Address 1000 Main St		
	City, State Zip Williamsburg, KY 40769		Other:
		8	Method of Payment:
2	KDE Contact Information:		Federal Cash Request
	Program Consultant <u>Title II Consultants</u>		Expenditure Reimbursement
	Street Address 19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address 16 th Floor, 500 Mero St.	N	Receipt of Invoice from Vendor
	City, KY Zip Frankfort, KY 40601	1	
	P _p	9	Reimbursement Frequency:
3	Description/Fund Source of Award and Fiscal Year:		Monthly
	Description FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source Title II, Part A Improving Teacher Quality	Λ	Other
	CFDA# 84.367A		
	PR/AWARD NUMBER (FAIN) S367A150016		
	MUNIS Project Number 401B	10	Financial Reporting Method:
	MOA Number N/A		Electronic Submission
	Pass-through Number 3230002-15	/ A \	
			Other
4	Grant Authority (Source): NCLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79,	, 81 & 85	
	and the Uniform Administrative Requirements, Cost Principles, and Audit Requ	irements	
	for Federal Awards in 2 CFR Part 200.	D	
	PROFICIENT &	PREPAR	ED FOR
5	REVISED Award Amount:	11	Evaluations: Districts must annually evaluate the use of teacher
	\$63,971.00		and principle quality funds to ensure they are used to address
6	Period of Award:		identified needs and are effective in producing the desired
	July 1, 2015 – September 30, 2017 KENTUCKY DEPARTM	MENT OF ED	outcomes.
	(All funds must be spent or encumbered by September 30, 2017. The quarte		Sec. (346) 1. 3 (2011) Sec. (2011)
42	report for the period ending September 30, 2017 must reflect encumbrance	S.)	
12	Consortia/Partnership Members:	Dudent'	to add an abit a non-negative from the district of the state of the st
13	Special Instructions/Conditions: The submission of the Teacher Quality Progra	am Budget is requi	ired for this program. The final federal cash request must be
	submitted by December 8, 2017.		
14	Authorized By (Name/Title): Robin Hebert, Director		Date: March 2, 2016
	Division of Next Generation Professionals		······································

1	Name and Address of Recipie		7	Fund Type:
	Agency Name Williams	town Independent		State
	Street Address 300 Helt	on St		
	City, State Zip Williams	town, KY 41097		Other:
			8	Method of Payment:
2	KDE Contact Information:			Federal Cash Request
	Program Consultant	<u>Title II Consultants</u>	HI	Expenditure Reimbursement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor
	City, KY Zip	Frankfort, KY 40601		
			9	Reimbursement Frequency:
3	Description/Fund Source of A	Award and Fiscal Year:	The ST	Monthly
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly
	Fund Source	Title II, Part A Improving Teacher Quality		Other
	CFDA#	84.367A		
	PR/AWARD NUMBER (FAIN)	S367A150016		
	MUNIS Project Number	401B	10	Financial Reporting Method:
	MOA Number	N/A		Electronic Submission
	Pass-through Number	3230002-15		
				Other
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 &	85	
-		ve Requirements, Cost Principles, and Audit Requireme		
	for Federal Awards in 2 CFR P		11103	
		PROFICIENT & PI	REPAR	RED FOR
5	REVISED Award Amount:	C 11 C C	11	Evaluations: Districts must annually evaluate the use of teacher
	\$29,532.00	2 U C C		and principle quality funds to ensure they are used to address
6	Period of Award:			identified needs and are effective in producing the desired
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMEN	IT OF E	outcomes.
		encumbered by September 30, 2017. The quarterly		DOCATION
		September 30, 2017 must reflect encumbrances.)		
12	Consortia/Partnership Memb			
13	•		ıdget is req	uired for this program. The final federal cash request must be
	submitted by December 8, 20	017.		
44	Analysis of Decision (Print)	Dahia Habart Disastan		Debay March 2 2016
14	Authorized By (Name/Title): Robin Hebert, Director Date: March 2, 2016			Date: March 2, 2016
		Division of Next Generation Professionals		

1	Name and Address of Recipie	ent:	7	und Type:	
	Agency Name Wolfe Co	ounty		State	
	Street Address PO Box 2	160		Federal	
	City, State Zip Campton	n, KY 41301		Other:	
			8	Method of Payment:	
2	KDE Contact Information:	10V		Federal Cash Reques	
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbu	rsement
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment	
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306		Lump Sum	
	Street Address	16 th Floor, 500 Mero St.	_	Receipt of Invoice from	om Vendor
	City, KY Zip	Frankfort, KY 40601	-		
			9	eimbursement Frequency:	
3	Description/Fund Source of A		15	Monthly	
	Description	FY2016 Title II, Part A Improving Teacher Quality		Quarterly	
	Fund Source	Title II, Part A Improving Teacher Quality		Other	
	CFDA#	84.367A			
	PR/AWARD NUMBER (FAIN)	S367A150016			
	MUNIS Project Number	401B	10	inancial Reporting Method:	
	MOA Number	N/A	/	Electronic Submissio	n
	Pass-through Number	3230002-15			
				Other	
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81	& 85		
		ve Requirements, Cost Principles, and Audit Requirem	ients		
	for Federal Awards in 2 CFR P	art 200.			
		PROFICIENT & P	REPAR	D FOR	
5	REVISED Award Amount:	$c \cup c \subset c$	11		nnually evaluate the use of teacher
	\$145,053.00	3 0 6 6			ensure they are used to address
6	Period of Award:		_		ctive in producing the desired
	July 1, 2015 – September 30,		NT OF E	utcomes.	
	(All funds must be spent or	encumbered by September 30, 2017. The quarterly September 30, 2017 must reflect encumbrances.)			
12	Consortia/Partnership Meml				
13		ons: The submission of the Teacher Quality Program B	Rudget is reau	for this program. The final	federal cash request must be
13	submitted by December 8, 20	· · · · · · · · · · · · · · · · · · ·	ouuget is requ	a for this program. The mia	rederal cash request must be
	Janimeted by December 0, 20	·-··			
14	Authorized By (Name/Title):	Robin Hebert, Director		ite: March 2, 2016	
		Division of Next Generation Professionals			
				·	

1	Name and Address of Recipient:		7	Fund Type:		
	Agency Name Woodfo	rd County		State		
	Street Address 330 Pisg	ah Pk				
	City, State Zip Versaille	s, KY 40383		Other:		
			8	Method of Payment:		
2	KDE Contact Information:	21/6	M m -	Federal Cash Request		
	Program Consultant	<u>Title II Consultants</u>		Expenditure Reimbursement		
	Street Address	19 th Floor, 500 Mero St.		Automatic Payment		
	Budget Contact	Stephanie Mack, 502-564-1979 Ext. 4306	7	Lump Sum		
	Street Address	16 th Floor, 500 Mero St.		Receipt of Invoice from Vendor		
	City, KY Zip	Frankfort, KY 40601				
			9	Reimbursement Frequency:		
3	Description/Fund Source of A	Award and Fiscal Year:	FR	Monthly		
	Description	FY2016 Title II, Part A Improving Teacher Quality		Monthly Quarterly		
	Fund Source	Title II, Part A Improving Teacher Quality		Other		
	CFDA#	84.367A				
	PR/AWARD NUMBER (FAIN)	S367A150016				
	MUNIS Project Number	401B	10	Financial Reporting Method:		
	MOA Number	N/A		Electronic Submission		
	Pass-through Number	3230002-15				
			1 1	Other		
4	Grant Authority (Source): NO	CLB, Title II, Part A, EDGAR 34 CFR Parts 76, 77, 79, 81 & 85				
-	• • • •	ve Requirements, Cost Principles, and Audit Requirements				
	for Federal Awards in 2 CFR P		'			
	ion reactar/wards in 2 cm.	PROFICIENT & PRI	FPAR	PED FOR		
5	REVISED Award Amount:		11	Evaluations: Districts must annually evaluate the use of teacher		
	\$125,540.00	SUCC		and principle quality funds to ensure they are used to address		
6	Period of Award:		_	identified needs and are effective in producing the desired		
	July 1, 2015 – September 30,	2017 KENTUCKY DEPARTMENT	OF F	outcomes.		
		encumbered by September 30, 2017. The quarterly	OF L	DOCATION		
		September 30, 2017 must reflect encumbrances.)				
12	Consortia/Partnership Memb	pers:				
13	Special Instructions/Conditio	ns: The submission of the Teacher Quality Program Budg	et is requ	uired for this program. The final federal cash request must be		
	submitted by December 8, 20	, , , , , , , , , , , , , , , , , , ,	•			
14	Authorized By (Name/Title):	Robin Hebert, Director		Date: March 2, 2016		
		Division of Next Generation Professionals				